

# Change of Member Details Form



Use this form to advise First Super of any changes to your personal details.

Please fill out **ALL** your current details in Section 1, and then provide your new details in Section 2. If you have changed your name, please attach a certified copy of a linking document as proof. See over page for information regarding required linking and certification documents, and required identification documents.

Please complete this form with **CAPITAL LETTERS** and a blue or black pen.

## Section 1 | Your personal details

Member number	Account number (if known)	Date of birth (DD/MM/YYYY)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Title (Mr, Mrs, Ms etc.)	Account type (tick one): <input type="checkbox"/> Super Account OR <input type="checkbox"/> TTR or Retirement Income account		
<input type="text"/>			
Surname			
<input type="text"/>			
Given name(s)			
<input type="text"/>			
Residential address			
<input type="text"/>			
Town/Suburb/City	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Postal address (if different from above)			
<input type="text"/>			
Town/Suburb/City	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Telephone (home)	Telephone (work)	Mobile number	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email address			
<input type="text"/>			

**Section 2 – Provide your new details. Only complete the sections that have changed.**

Title

Date of birth (DD/MM/YYYY)

 

Surname

Given name(s)

Residential address

Town/Suburb/City

State

Postcode

Postal address (if different from above)

Town/Suburb/City

State

Postcode

Telephone (home)

Telephone (work)

Mobile number

Email address

If you have changed your date of birth or name, certified identification is required, as well as a linking document. Please attach a certified copy of a linking document as proof. See over page for information regarding linking and certification of documents.

I confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder via third party systems for the purpose of confirming my identity.

Please sign here

Date (DD/MM/YYYY)

## Have you changed your date of birth or name?

If you have changed your date of birth or name you will need to provide a **certified** linking document. A linking document is a document that proves a relationship exists between two (or more) names. You will also need to provide relevant, certified, identification documents as listed in the Completing Proof of Identity Fact Sheet, available on the First Super website.

The following table contains information about suitable linking documents.

Purpose	Suitable linking documents
Change of name	Marriage certificate; Deed poll; or Change of name certificate from the Births, Deaths & Marriages Registration Office

## Certification of Personal Documents

All copied pages of ORIGINAL proof of identification documents (including any linking documents) must be certified as true copies by individuals approved to do so (see below). The person who is authorised to certify documents must sight the original and the copy and make sure both documents are identical, then make sure all pages have been certified as true copies by writing or stamping 'certified true copy' followed by their signature, printed name, qualification (e.g. Justice of the Peace, Police Officer – including police stamp and badge number, etc) date, contact address and phone number.

### Those who can certify documents as being true and correct copies include:

- > Finance company officer, a bank officer, a building society officer or a credit union officer who has five or more years of continuous service
- > Financial advisor or financial planner
- > Notary public officer or a Commissioner of Affidavits or a Commissioner for Declarations
- > Police officer
- > Justice of the Peace
- > Australian consular officer or an Australian diplomatic officer
- > Judge, Magistrate, Chief Executive Officer of a Commonwealth court, clerk of a court, registrar or deputy registrar of a court
- > Migration agent
- > Teacher employed on a full-time or part-time basis
- > Legal practitioner, patent attorney, trade marks attorney
- > Medical practitioner, dentist, nurse, chiropractor, midwife, occupational therapist, physiotherapist, pharmacist, optometrist and psychologist
- > Veterinary surgeon.

## How to send us certified copies of documents:

Mail your form and any other document(s) to:

 First Super, PO Box 666, Carlton South, VIC 3053

Email your form and any other document(s) to:

 [mail@firstsuper.com.au](mailto:mail@firstsuper.com.au)

**Please retain all original documents for future use in case it is required by the Trustee.**

For more information, read our Completing Proof of Identity fact sheet at [firstsuper.com.au/forms-tools/](https://firstsuper.com.au/forms-tools/)

## Want to know more? We're here to help

Call our Member Services Team weekdays  
8am – 6pm (Melbourne time) for general advice  
or speak to your local Member Services Coordinator.



1300 360 988



[mail@firstsuper.com.au](mailto:mail@firstsuper.com.au)



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to manage your account



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